

Age Specific Fertility Rates (ASFR)

Why is a low ASFR for Adolescents so Important?

Maintaining a relatively low ASFR is crucial for a safe delivery for both mother and child and contributes to the likelihood of a more stable environment for child rearing. As seen in the 2008 Millennium Development Goals Report, adolescent pregnancy contributes to the cycle of maternal deaths and childhood mortality. Having children too early in life will also reduce the educational opportunities for some mothers and put some children at a socio-economic disadvantage.

The tables below illustrate the ASFRs from the years 1975 to 2008. The ASFR is the number of births during a year to women in a particular age group, usually per 1,000 women in a five (5)-year age group at midyear. All data below are based on research conducted by the National Family Planning Board.

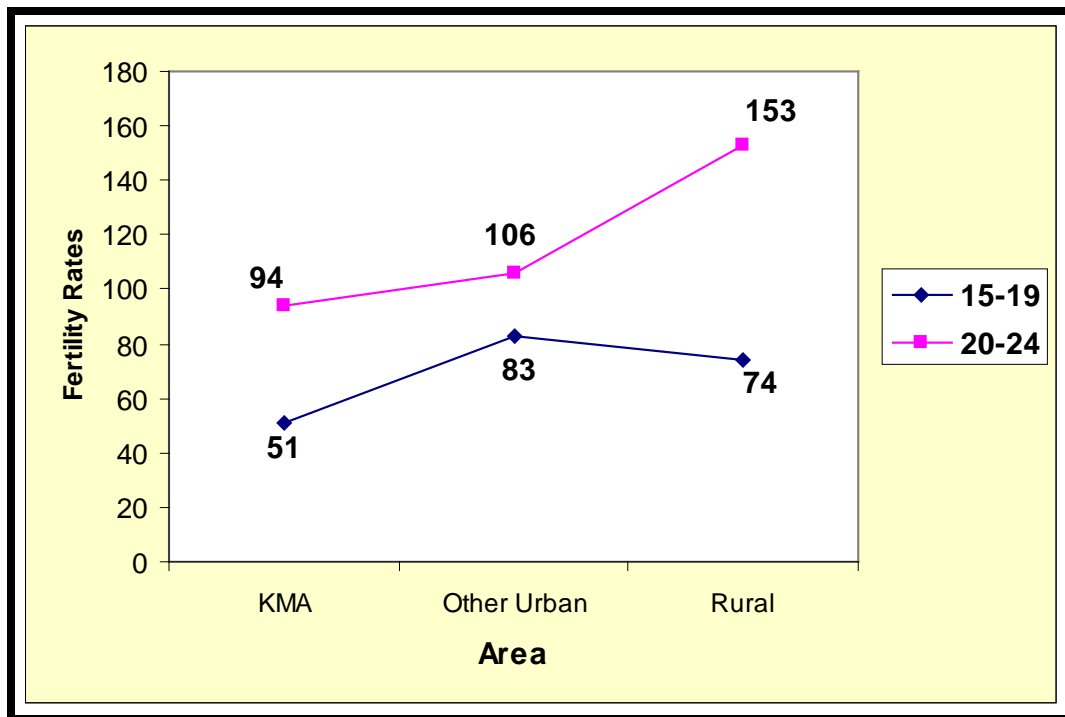


Figure 1: Age Specific Fertility Rates by Maternal age and by Area of Residence for the Year 2008

Source: 2008 Reproductive Health Survey

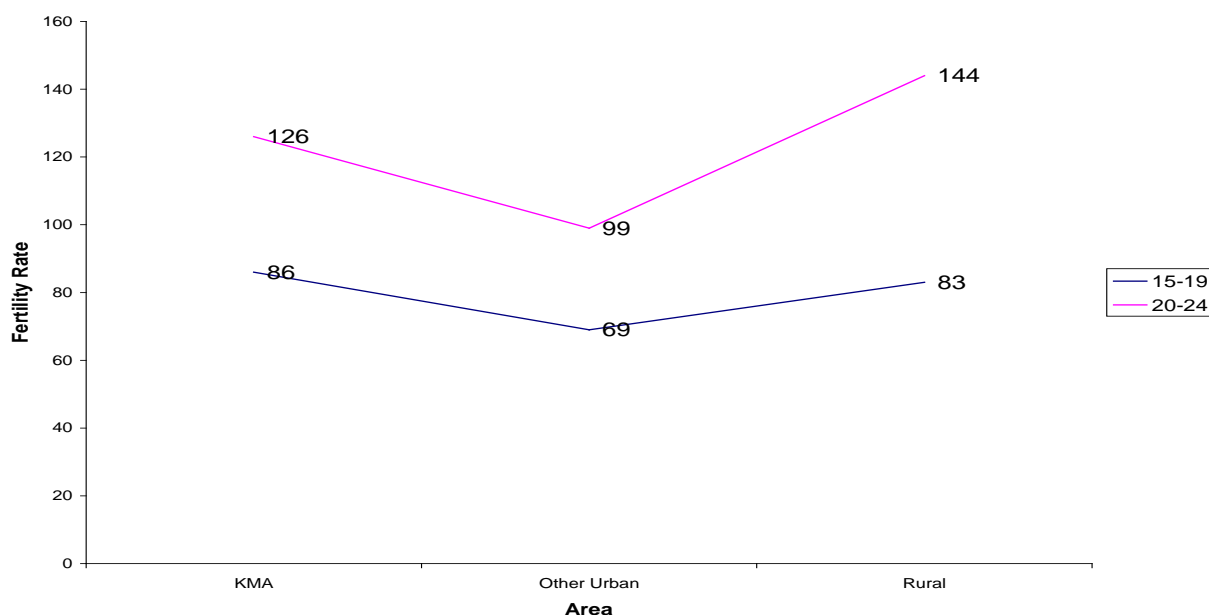


Figure 2: Age Specific Fertility Rates by Maternal age Group and Area of Residence for the Year 2002

Source: 2002 Reproductive Health Survey

Figures 1 & 2 illustrate the differences in the Adolescent Fertility Rate by area of residence, which includes the ‘Kingston Metropolitan Area’ (KMA)¹, ‘Other Urban’ areas and ‘Rural’ areas by age group for the years 2008 and 2002 respectively. When comparing the trends in the two (2) survey years, it is observed that in the age group 15-19 for the KMA, the ASFR fell from 86 in 2002, to 51 in 2008, a decrease of 41 percent. The ASFR also declined in the KMA for the 20-24 age group with an ASFR of 126 in 2002 and 94 in 2008, a decrease of approximately 32 percent.

In Other Urban Areas, the ASFR for the 15-19 age group however increased from 69 in 2002 to 106 in 2008, an increase of 53.6 percent. Similar trends were observed in the 20-24 age group in the year 2002 with an increase from 99 in 2002 to 106 in 2008, an increase of seven (7) percent.

A decline was observed in the ASFR for the 15-19 age group for Rural areas from 83 in 2002 to 74 in 2008, a decline of 10.8 percent. However, an increase was once again observed for the 20-24 age group with an increase from 144 in 2002 to 153 in 2008, an increase of six (6) percent.

¹ Kingston Metropolitan Area (KMA) is defined as Kingston and the urban sections of St. Andrew.

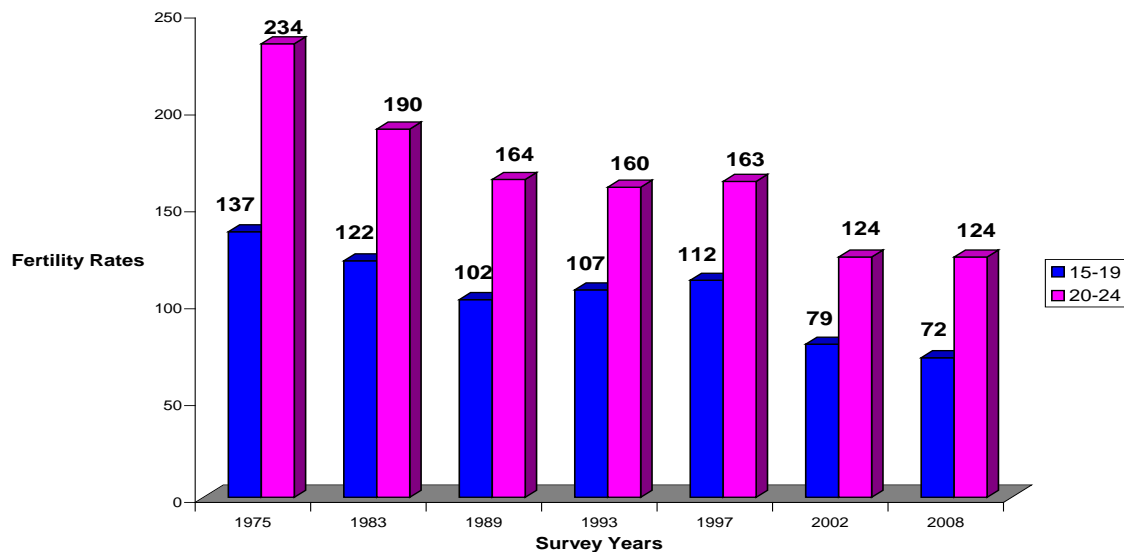


Figure 3: Age Specific Fertility Rates by Maternal age Group and Survey Years

Source: 1975 Jamaica Fertility Survey, 1983, 1989, 1993 Contraceptive Prevalence Surveys, 1997, 2002 and 2008 Reproductive Health Surveys

In Figure 3 above, when observing the ASFR in comparative survey years, apart from a few fluctuations between comparative years 1989 and 1993 as well as 2002 and 2008, it is clear that the ASFR for both age groups 15-19 and 20-24 has steadily declined. These rates moved from 137 in 1975 to 71 in 2008 for the 15-19 age group. The ASFR steadily declined from 234 in 1975 for the 20-24 age group to 127 in 2008.

Comparing the last two (2) survey years however, it was observed that the ASFR for the 15-19 age group declined from 79 in 2002 to 72 in 2008, a decline of 9 percent. The ASFR for the 20-24 age group however, remained stable at 124 when comparing years 2002 and 2008.